

APPENDIX

U.S. NUCLEAR REGULATORY COMMISSION
REGION IV

NRC Inspection Report: 50-482/90-33

Operating License: NPF-42

Docket: 50-482

Licensee: Wolf Creek Nuclear Operating Corporation (WCNOC)
P.O. Box 411
Burlington, Kansas 66837

Facility Name: Wolf Creek Generating Station (WCGS)

Inspection At: WCGS, Burlington, Kansas

Inspection Conducted: September 10-14, 1990

Inspector:

Wm McNeill
W. M. McNeill, Reactor Inspector, Materials
and Quality Programs Section, Division of
Reactor Safety

9/27/90
Date

Approved:

I. Barnes
I. Barnes, Chief, Materials and Quality
Programs Section, Division of Reactor Safety

9/27/90
Date

Inspection Summary

Inspection Conducted September 10-14, 1990 (Report 50-482/90-33)

Areas Inspected: Routine, unannounced inspection of the audit program and its implementation.

Results: Within the areas inspected, no violations or deviations were identified. The audit program was found to be adequately defined and effectively implemented. A lack of clarity was noted in procedural criteria for required scope of audits.

DETAILS

1. PERSONS CONTACTED

1.1 WCNOC

- *G. D. Boyer, Plant Manager
- R. F. Butz, Quality Assurance (QA) Engineer
- *H. L. Chernoff, Licensing Supervisor
- *T. F. Daddens, Outage Manager
- *M. F. Dingler, Nuclear Plant Engineering System Manager
- D. L. Donahoe, QA Specialist
- *R. D. Flannigan, Nuclear Safety Engineering Manager
- *W. M. Lindsey, QA Manager
- *R. L. Logsdon, Chemistry Manager
- O. L. Maynard, Licensing Manager
- R. A. Meister, QA Specialist
- G. S. Miller, QA Specialist
- *D. G. Moseby, Operations Supervisor
- *W. B. Norton, Technical Support Manager
- *C. E. Parry, Director, Quality
- D. L. Peavler, QA Specialist
- *E. M. Peterson, QA Audit Supervisor
- *F. T. Rhodes, Vice President, Engineering and Technical Support
- *C. M. Sprout, Nuclear Plant Engineering Section Manager
- *S. G. Wideman, Licensing Specialist
- *M. G. Williams, Plant Support Manager

1.2 Kansas Electric Power Cooperative

- *W. J. Goshorn, Wolf Creek Coordinator

1.3 NRC

- *M. E. Skow, Senior Resident Inspector

*Denotes those persons that attended the exit interview on September 14, 1990.

2. AUDIT PROGRAM AND IMPLEMENTATION (40702 and 40704)

The objectives of this inspection were to ascertain whether the licensee has established and implemented an audit program, using qualified personnel, which is in conformance with Technical Specifications (TS), regulatory requirements, commitments in the Updated Safety Analysis Report (USAR), and industry guides and standards.

2.1 Program

The QA audit program was defined in the Corporate Quality Manual, Section 9, Revision 0, and implemented with the procedures listed in the Attachment to

this report. Audit frequencies were established with a biennial (2 year) schedule, from which a 6 month schedule was developed for planned audits and surveillances. The audits were noted to be performance based in concept and used an Essential Elements Manual (EEM) for development of an individual audit plan and checklist. The EEM listed the 41 areas audited with the elements (tasks) and the associated attributes (subtasks) to be addressed in an audit. The EEM also identified the reference sources of the requirements. Audit findings were documented (in a decreasing level of significance) as Quality Program Violations (QPVs), Quality Program Deviations (QPDs), Performance Improvement Recommendations (PIRs) and "Observation Weakness." Except for the latter these findings were tracked in a computer system. The audited organization was required to respond to QPVs and QPDs with root causes and corrective actions. Lead auditors were required to be qualified to ANSI 45.2.23.

2.2 Implementation

The inspector reviewed the current biennial schedule and 6 month audit/surveillance schedule. As of the inspection, a total of 24 audits and 78 surveillances have been performed during 1990, which was consistent with schedule requirements. These activities appeared to be effective in identifying problems and resulted in the issuance of 28 QPVs, 64 QPDs, 48 PIRs, and 1 Corrective Action Request (CAR). A CAR is issued for a significant condition adverse to quality for which other corrective action systems have not been effective. The CAR issued in 1990 pertained to the failure of the engineering organization to provide timely corrective action responses to audit findings and to prevent recurrence of identified problems.

The inspector reviewed in detail a sample of recently completed audits and surveillances which are listed in the Attachment to this report. This review included the audit plans, checklists, field notes (if available), final report and associated findings. The qualifications of the lead auditors were verified to meet the requirements of ANSI 45.2.23. In that the findings of the sampled audits and surveillances had been issued recently, resolution of the findings could not be reviewed. Additional review of this activity will be performed during a subsequent inspection. The inspector noted that not all applicable EEM items (elements/attributes) were used in all audits. The inspector was concerned in that procedures did not clearly define the required scope of audits and extent of EEM usage. A review of the planning of two audit areas (surveillance testing and corrective action) for the past 2 years found that while certain EEM items were not addressed in the audits, they were covered in surveillances.

It was also observed that audit findings were not always identified in the finding categories specified in procedures. A number of audit reports cited "recommendations," but upon review with the lead auditors, it was found that these findings were "Observation Weaknesses" but not labeled as such in the reports.

No violations or deviations were identified in this inspection.

3. EXIT INTERVIEW

An exit meeting was held on September 14, 1990, with those individuals denoted in Section 1 of this report. At this meeting, the scope of the inspection and the findings were summarized. The licensee did not identify as proprietary any of the information provided to, or reviewed by the inspector.

ATTACHMENT

LISTING OF DOCUMENTS REVIEWED

Procedures:

Qualification and Certification of Quality Department Audit Personnel, QP 14.4, Revision 2

Audit/Surveillance Scheduling, QAP 18.1, Revision 3

Audit Procedure, QAP 18.2, Revision 3

Surveillance Procedure, QAP 18.3, Revision 3

Tracking of Conditions Adverse to Quality, QAP 18.4, Revision 3

Audit System, QAP 18.5, Revision 3

Quality Unresolved Items, QAP 18.6, Revision 3

Tracking of Performance Improvements Recommendations, QAP 18.8, Revision 0

Audits:

TE:50140-K291-Emergency Preparedness Program

TE:50140-K290-Document Control

TE:50140-K288-Corrective Action

TE:50140-K284-Environment Protection Plan

QD 90-0052-QA Effectiveness Review

Surveillances:

TE:53359-S1848-Control of Drawings

TE:53359-S1847-Control and Storage of Materials

TE:53359-S1846-Calibration of Process & Effluent Radiation Monitors